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JUL 25 2005  
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33942 7590 04/22/2005

**CHA & REITER, LLC**  
210 ROUTE 4 EAST STE 103  
PARAMUS, NJ 07652

07/26/2005 AKELECH2 00000004 09818211

01 FC:1501	1400.00 DP
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<b>STEVE CHA</b>	(Depositor's name)
	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/818,211	03/27/2001	Chang-Won Kim	5000-1-176	2480

TITLE OF INVENTION: MOBILE COMMUNICATION NETWORK SYSTEM USING DIGITAL OPTICAL LINK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/22/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BEAMER, TEMICA M	2681	455-561000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	1 <b>CHA &amp; REITER, L.L.C.</b>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 _____
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)	3 _____

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**SAMSUNG ELECTRONICS CO., LTD.**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**416, MAETAN-DONG, YEOUNGTONG-GU  
SUWON-SI, GYEONGGI-DO  
KOREA, REPUBLIC OF KOREA**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

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 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 5

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 502-470 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature STEVE CHA

Date 7/22/05

Typed or printed name STEVE CHA

Registration No. 44,069

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